

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE    |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION         | LH       | 68904  | 6/9/00  |
| O.I.P.E. CLASSIFIER       | ST       | 69916  | 7/29/00 |
| FORMALITY REVIEW          |          |        |         |
| RESPONSE FORMALITY REVIEW |          |        |         |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim | Final | Original | Date     |
|-------|-------|----------|----------|
| 1     | ✓     | ✓        | 11/13/03 |
| 2     | ✓     | ✓        | 3/16/04  |
| 3     | ✓     | ✓        |          |
| 4     | ✓     | ✓        |          |
| 5     | ✓     | ✓        |          |
| 6     | ✓     | ✓        |          |
| 7     | ✓     | ✓        |          |
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| 17    | ✓     | ✓        |          |
| 18    | ✓     | ✓        |          |
| 19    | ✓     | ✓        |          |
| 20    | ✓     | ✓        |          |
| 21    | 0     | 0        |          |
| 22    | 0     | 0        |          |
| 23    | 0     | 0        |          |
| 24    | ✓     | ✓        |          |
| 25    | ✓     | ✓        |          |
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| 27    | ✓     | ✓        |          |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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